

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	70.		4-25-00
O.I.P.E. CLASSIFIER		7	5-7-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	JB	58222	6-19-00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 u ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	6-29-00
2	7-29-00
3	4-28-00
4	10-21-00
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Claim	Date
Final Original	
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52	7-29-00
53	4-28-00
54	10-21-00
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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